

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 (571) 273-2885

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

000041396 7590 12/21/2005
 DUANE MORRIS LLP
 IP DEPARTMENT
 30 SOUTH 17TH STREET
 PHILADELPHIA, PA 19103-4196
 01/10/2006 MGEBRM2 00000121 041679 10786431

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA
 03 FC:8071 APPLICATION NO. DA FILING DATE FIRST NAMED INVENTOR



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

| | |
|---------------------------|--------------------|
| Samuel W. Apicelli | (Depositor's name) |
| <i>Samuel W. Apicelli</i> | (Signature) |
| <i>January 10, 2006</i> | (Date) |

| | | | | |
|--------------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. DA | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10786431 | 02/25/2004 | Alfred L. Phillips | H1799-00201- | 2808 |

TITLE OF INVENTION: FLEXIBLE LOOP THERMOSYPHON

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|---------------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 03/21/2006 |
| EXAMINER | ART UNIT | | CLASS-SUBCLASS | | |
| MCKINNON, TERRELL L | 3753 | | 165-104210 | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Duane Morris LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Thermal Corp.

Wilmington, DE

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 5

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1679 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Samuel W. Apicelli

Typed or printed name

Date 1/10/06

Registration No. 36,427

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

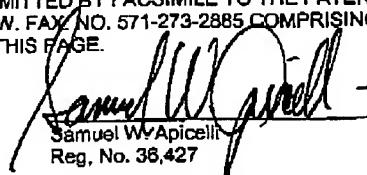
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



CERTIFICATE OF FACSIMILE TRANSMISSION 37 C.F.R. 1.6 & 1.8
 CERTIFY THAT THIS CORRESPONDENCE IS BEING TRANSMITTED BY FACSIMILE TO THE PATENT AND TRADEMARK
 OFFICE ON THE DATE AND TO THE NUMBER SHOWN BELOW. FAX NO. 571-273-2885 COMPRISING FOUR (4) SHEETS
 INCLUDING THIS PAGE.

Date:

January 10, 2006


 Samuel W. Apicelli
 Reg. No. 36,427

IN THE PATENT AND TRADEMARK OFFICE

In re: Application of: Phillips et al.

Serial No.: 10/786,431

Examiner: McKinnon, Terrell L.

Filed: 02/25/2004

Group Art Unit: 3753

For: FLEXIBLE LOOP THERMOSYPHON

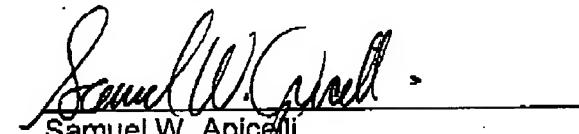
TRANSMITTAL LETTER

Mail Stop Issue Fee
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450
 Sir:

Please find enclosed for filing:

- Issue Fee Transmittal form Part B submitted in duplicate
- Please charge the fees, namely, \$1715 for issue fee & 5 copies to Deposit Account No. 04-1679. This Transmittal Letter is submitted in duplicate.
- Certificate of Facsimile

Respectfully submitted,



Samuel W. Apicelli
 Registration No. 36,427
 Customer No. 0041396
 DUANE MORRIS LLP
 30 S. 17th Street
 Philadelphia, PA 19103-4196
 Tel.: (215)979-1255
 Fax: (215) 979-1020
 swapicelli@duanemorris.com

Dated: 1/10/06

Docket No.: H1799-00201